## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |   |                                 |                                    |                          |                  |                          |      | SMALL ENTITY TYPE |                        |                  | OTHER THAN OR SMALL ENTITY |                        |  |
|--|---|---------------------------------|------------------------------------|--------------------------|------------------|--------------------------|------|-------------------|------------------------|------------------|----------------------------|------------------------|--|
| TOTAL CLAIMS                                   |   |                                 | 18                                 |                          |                  |                          | ] .  | RATE              | FEE                    | ٦                | RATE                       | FEE                    |  |
| FC   | DR  |                                 | NUMBER FILED                       |                          | NUMBER EXTRA     |                          |      | BASIC FE          | +                      | OR               | BASIC FEE                  |                        |  |
| TO   | TAL CHARGE  | ABLE CLAIMS                     | / F minus 20=                      |                          | *                |                          |      | X\$ 9=            |                        | 1                | X\$18=                     |                        |  |
| INI  | DEPENDENT C   | LAIMS                           | 2 minus 3 =                        |                          | *                |                          |      |                   | <del> </del>           | OR               |                            |                        |  |
| _  |   | NDENT CLAIM P                   | 1 0                                | 1103 0 =                 |                  |                          |      | X43=              | ļ                      | OR               | X86=                       |                        |  |
|  | \   |                                 |                                    |                          |                  |                          |      | +145=             |                        | OR               | +290=                      |                        |  |
| * If   | the difference  | in column 1 is                  | ess than zero, enter "0" in column |                          |                  | column 2                 | •    | TOTAL             |                        | OR               | TOTAL                      | 770                    |  |
| CLAIMS AS AMENDED - PART II                    |   |                                 |                                    |                          |                  |                          |      |                   |                        | _                | OTHER                      |                        |  |
| (Column 1)                                     |   |                                 | T                                  | (Colun                   |                  | (Column 3)               | 1 6  | SMALL             |                        | OR               | SMALL                      |                        |  |
| AMENDMENT A                                    |   | REMAINING<br>AFTER<br>AMENDMENT |                                    | NUME<br>PREVIO<br>PAID I | BER<br>OUSLY     | PRESENT<br>EXTRA         |      | RATE              | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *                               | Minus                              | **                       |                  | =                        |      | X\$ 9=            |                        | OR               | X\$18=                     | •                      |  |
| AME  | Independent   | *                               | Minus                              | ***                      |                  | =                        |      | X43=              |                        | OR               | X86=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                 |                                    |                          |                  |                          |      | +145=             |                        | OR               | +290=                      |                        |  |
|  |   |                                 |                                    |                          |                  |                          | L    | TOTAL             |                        | ا <sub>م</sub> ا | TOTAL                      |                        |  |
| (Column 1) (Column 2) (Column 3)               |   |                                 |                                    |                          |                  |                          |      | DDIT. FEE         | L                      | OR,              | ADDIT. FEE                 |                        |  |
|  |   | CLAIMS HIGHE                    |                                    |                          | (Column 3)       | 1 r                      |      | ADDI              | 1 1                    |                  | 4 DD1                      |                        |  |
| T B  |   | REMAINING<br>AFTER              |                                    | NUME<br>PREVIO           |                  | PRESENT<br>EXTRA         |      | RATE              | ADDI-<br>TIONAL        | 1 1              | RATE                       | ADDI-<br>TIONAL        |  |
| AEN  |   | AMENDMENT                       |                                    | PAID F                   | OR               |                          |      |                   | FEE                    |                  |                            | FEE                    |  |
| AMENDMENT B                                    | Total   | *                               | Minus                              | **                       | •                | =                        | l L  | X\$ 9=            |                        | OR               | X\$18=                     |                        |  |
| AME  | Independent   | ependent                        |                                    | CI AINA                  | =                |                          | X43= |                   | OR                     | X86=             |                            |                        |  |
| THE PERSON ALIGN OF MULTIPLE DEPENDENT CLAIM   |   |                                 |                                    |                          |                  |                          |      | +145=             |                        | OR               | +290=                      |                        |  |
|  |   |                                 |                                    |                          |                  |                          |      | TOTAL             |                        | CP L             | TOTAL                      | •                      |  |
| (Column 1) (Column 2) (Column 3)               |   |                                 |                                    |                          |                  |                          |      | DDIT. FEE         |                        | Y ,              | ODIT. FEE                  |                        |  |
|  | `   | CLAIMS                          |                                    | HIGHE                    | ST<br>ER<br>USLY | (Column 3) PRESENT EXTRA | l –  |                   | 4001                   | Г                | <del></del> 1              | 4551                   |  |
| AMENDMENT C                                    |   | REMAINING<br>AFTER<br>AMENDMENT |                                    | NUMB<br>PREVIO           |                  |                          |      | RATE              | ADDI-<br>TIONAL<br>FEE |                  | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *                               | Minus                              | **                       |                  | =                        |      | X\$ 9=            |                        | OR               | X\$18=                     | _                      |  |
|  | Independent   | *                               | Minus                              | ***                      |                  | =                        | ┞    | X43=              |                        | f                | X86=                       |                        |  |
| ⋖ [  | FIRȘT PRESE   | NTATION OF ML                   | ILTIPLE DEF                        | TIPLE DEPENDENT (        |                  |                          |      |                   |                        | OR               | <u> </u>                   |                        |  |
|  | * If the entry in column 1 is less than the entry is solven 0 water 102 is solven 0.  |                                 |                                    |                          |                  |                          |      |                   |                        | OR               | +290=                      |                        |  |
| ***  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                 |                                    |                          |                  |                          |      |                   |                        |                  |                            |                        |  |